

Approved on 02/22/08

**INTERAGENCY COORDINATING COUNCIL ON EARLY INTERVENTION
GENERAL MEETING**

November 30, 2007

MEMBERS PRESENT:

Raymond M. Peterson, M.D., MPH, Chair ICC
Arleen Downing, M.D., Chair ISHC
Marie Kanne Poulsen, Ph.D., Chair QSDS
Jim Bellotti, Designee for the Superintendent of Public Instruction (CDE)
Rick Ingraham, Designee for the Director (DDS)
Dan McCord, Designee for the Director (DMHC)
Hallie Morrow, M.D., Designee for the Director (CDHS)
Suzie O'Neill, Designee for the Director (DADP)
Cheryl Treadwell, Designee for the Director (CDSS)

MEMBERS ABSENT:

Theresa Rosinni, Co-Chair ICC, Chair FRSC
Gretchen Hester, Co-Chair ISHC
Beverley Morgan-Sandoz, Co-Chair QSDS
Elaine Fogel Schneider, Ph.D., Chair PAC
Toni Gonzales
Hilva Chen, Designee for the Director (DMH)
Legislative Representative

OTHERS PRESENT:

Toni Doman, Co-Chair PAC
Linda Landry, Family Resource Centers Network of California
Debbie Sarmento, Co-Chair FRSC
Kevin Brown, ICC Staff Manager
Patric Widmann, ICC Staff
Kay Ryan, WestEd

Refer to Attachment A for a complete list of attendees.

INTRODUCTIONS AND ANNOUNCEMENTS:

Dr. Peterson called the meeting to order at 8:50 a.m. and welcomed and introduced Suzie O'Neill representing the Department of Alcohol & Drug Programs (DADP). Self-introductions were made by Council members and the audience.

AGENDA REVIEW:

The agenda was reviewed and approved.

APPROVAL OF SEPTEMBER 2007 MINUTES:

The September 2007 minutes were approved with revisions on page 31 to reflect the changes that the current Early Start monitoring system will change to a focused monitoring approach and clarify that the Blue Ribbon Task Force on Autism Report recommended that the Department of Public Health declare Autism a public health crisis.

EXECUTIVE COMMITTEE REPORT:

Dr. Peterson summarized the Executive Committee meeting. Travel to remote areas was discussed and there are limitations to the ICC budget that cannot support meetings in these areas. The Committee discussed alternate strategies, such as holding parent forums in conjunction with site monitoring, or teleconferencing.

All Standing Committees reported that they would have recommendations by May for ICC action in September 2008. The Executive Committee will have an interim meeting in June to review recommendations. Special presentations at 2008 meetings will include Proposition 63 in February, with Marie Paulsen moderating; Autism in May and September; and, EPSDT in November.

Marie Poulsen reported that a goal of the Parent Leadership Ad Hoc Workgroup is to increase participation in the ICC by families with young children and also stated that the Protocol for Appointing Community Representatives would be useful. Marie concluded by noting that the "Placemat" is an outstanding overview of the ICC and would be useful in recruiting families and providing at-a-glance information about the ICC.

CHAIR'S REPORT:

Dr. Peterson referred people to his written message on pages 1 and 2 of the packet and reiterated how important it is for us to keep our elected officials at the State and federal levels informed about the needs of infants, toddlers and families in California. He noted that next year is going to be a difficult one in terms of the budget and that we must let our Legislators know how important early intervention is in preventing disabilities. Dr. Peterson also told the committee that the OSEP National Conference scheduled for the first week in December would provide an opportunity for State representatives to talk with their federal counterparts and voice both program accomplishments and concerns. He concluded by reporting that the Governor has yet to make appointments to the ICC and did not know when that might happen.

ICC STAFF MANAGER'S REPORT:

Kevin Brown highlighted the travel instructions and reminded people to include the last four digits of their Social Security numbers on the worksheet. DDS will send out an email regarding this requirement. Kevin also informed participants that Sue Winar had left DDS to accept a position at the Department of General Services as manager of the State Training unit. The Early Start Section still has

three vacant positions but will be testing in December for Community Program Specialist II, a classification that is widely used in DDS. There is no freeze on these positions as they are federally-funded.

FAMILY RESOURCE CENTERS NETWORK OF CALIFORNIA REPORT:

Linda Landry reported on FRCNCA activities (Attachment B) including collaboration on Partners in Policymaking. Linda also suggested the possibility of the Partners in Policymaking assisting in raising the issue of ICC appointments to the Governor's Office through their contacts.

ACTION ITEM:

- **ICC Bylaw Revision** - The Bylaw changes were approved as amended (Attachment C) with proxy votes from Theresa Rosinni and Dr. Elaine Fogel-Schneider.

PUBLIC INPUT:

Shane Nurnberg – Shane, who is a parent and a community representative on the PAC, suggested the possibility of conducting ICC meetings in areas further north of Sacramento by holding two meetings in the capitol during the year, which might save money to conduct the one further north. Regarding the provision of services to children, Shane suggested that when it is known that a diagnosis will include referrals to specific services, as is often the case with Autism, that those services be authorized to begin immediately rather than waiting for the results of all assessments.

Rebecca Carroll – Rebecca, who is a parent and a community representative on the PAC, spoke of the need for starting services immediately. She also provided information about an upcoming workshop in Santa Barbara titled, *Frequently Asked Questions About Children with Special Needs* and read a letter from a grandmother, who is raising her grandson with Autism, and her need for respite care.

Laurie Jordan – Laurie, who is a parent and a community representative on the FRSC, read notes compiled by Rainbow Family Resource Center staff sharing conversations they had with parents. She encouraged the ICC to conduct focus groups to hear from people not able to attend meetings. She also shared information from a newsletter regarding triplets and the family's need for respite care.

Cora Shahid – Cora is a resident of Chula Vista and mother of two young children, one with bilateral hearing loss. The child's hearing loss was detected through the newborn hearing screening program, the diagnosis was confirmed at four weeks, and program treatment started immediately. Cora noted two areas where she felt things could be improved within the program: 1) Early Start providers need to have educational backgrounds with deaf and hard of hearing and 2) Increased parent-to-parent support.

Lois Pastore - Lois, a community representative on the QSDSC, reported that the Special Education Early Childhood Administrators Project (SEECAP) Annual Symposium is coming up on February 26-28, in Newport Beach, followed by two days of special events, March 4-5, in Sacramento. SEECAP's Excellence in Early Childhood Educational Leadership (ExCEL) program is for aspiring leaders - both parents and professionals - from early childhood and/or early childhood special education.

Tony Anderson – Tony, Executive Director of The Arc of California and community representative on the PAC, talked about a national program called Find Family, which helps to reunite families where a member has been lost as a result of institutionalization the Final Journeys conference on compassionate care, adding that another conference would be held in the South. He also noted that he has been working with Assembly Member Evans' office on the “stay put” provision in AB1663, a bill to bring California into alignment with the IDEA reauthorization and informed the committee that the Fetal Alcohol Spectrum Disorder (FASD) Task Force was also moving forward. Tony also voiced his concern over recent reports claiming that it is okay to drink during pregnancy. Tony concluded by stating that the “Partners in Policymaking”, a collaborative effort of The Arc of California and which includes the FRCNCA, California Association of Family Empowerment Centers (CAFEC), and Family Voices of California, was a motivating experience and that recruitment for participants in Central California was underway.

Fran Chasen - Fran, a community representative on the QSDSC, reported that while the recent fires caused disruption to lives as well as services, the Governor's declaration of a State of Emergency demonstrated needed support by ensuring service providers were not penalized. IDA has two upcoming training events, one on Home Visiting (January 18), in Merced and another on understanding challenging behavior in group settings (January 25), in Pomona.

PRESENTATION – Early Start Respite Services

Debbie Sarmento introduced Rachel Camacho Hagans from the Central Valley Regional Center and Terri Cook Clark from the San Diego Regional Center who presented an overview of respite services and the criteria used for determining the amount of respite services needed by families. Respite is a service provided to families under the Lanterman Developmental Disabilities Services Act. They explained differences between respite, child care, nursing services and medically-based respite. The options for vendors and use of vouchers for the provision of respite were also discussed.

A question was asked during the presentation about how respite is provided to solely low-incident children served under LEAs. The presenters noted that they did not have data to support a response to the question. In response to a question about whether there is a maximum and/or minimum number of respite

hours that can be funded, Rachael explained that there are guidelines that vary from regional center to regional center, but that they are flexible and based on individual need.

Debbie Sarmiento next introduced the parent panel, Rebecca Carroll from Santa Barbara and Ann Nurnberg from Redding who shared their family experiences with respite services and fielded questions from the members and audience. Initiation of respite services was different for both families. Rebecca reports that it took a year to find a qualified provider because her daughter needed a nurse. Ann reported that she was able to start using family providers quickly through the use of vouchers but that it was somewhat difficult because of taxes, the potential for audits, etc. Ann's family is currently receiving respite from a respite provider and as such, pointed out that mileage for respite providers is an important cost factor, especially when the family lives far from the provider.

COMMITTEE REPORTS:

Integrated Services and Health (ISH):

Arleen Downing reported on the committee's activities (see committee minutes for details). Arleen shared that the committee reviewed the Tool Kit on Autism developed by the American Academy of Pediatrics as well as articles about the medical home and Early Intervention. ISH members also reviewed the Bright Futures book that guides pediatricians about developmental screening and screening for Autism. Dan McCord provided information about the Department of Managed Health Care's (DMHC) role.

ISH also looked at their priority area, "special health care needs and managed care", and noted that the latest version of their work plan on page 166 of the ICC packet did not reflect work the Committee did in May and September.

Subsequently, ISH reviewed two versions of the work plan and incorporated changes into one document.

Public Awareness (PAC):

Toni Doman reported on PAC activities (see committee minutes for details).

Twelve people attended the newcomer's meeting on Thursday and PAC members were excited to see how participation has grown.

Changes to the Parent Leadership Award nomination form on page 104-111 of the ICC packet were discussed and agreed upon. PAC also discussed and developed a visual of an engraved acrylic star to honor the recipients. Other recommendations included eliminating attendance at the national conference as part of the award since this is not an annual event; forwarding the recipients name to OSEP, ARCA, the State Council on Developmental Disabilities (SCDD), and other groups who might be willing to put a congratulatory note in their newsletters.

PAC also suggested that all parent nominees be given recognition acknowledging their nomination. Marie further suggested revising the prototype certificate to

acknowledge and appreciate their leadership, rather than remind them that they were nominated but didn't win. Nomination forms will be distributed in early January with a return requested by February 15. The person selected will be honored at the May ICC meeting.

PAC asked if the Physician's brochure had been distributed and if so, to whom it was distributed. As their priority area, PAC wants to determine how to target and disseminate information to consumers and health care providers and would like to get a copy of the dissemination scheme. Peter Michael Miller remarked that the outcome isn't distribution of brochures; it is to establish relationships between regional centers, FRCs, and pediatricians. In San Diego, they've developed a partnership to get information to local Physicians.

PAC asked that DDS update the ICC member and Community Representative lists to include an asterisk (*) by parents names. Whether or not a parent is associated with an FRC or other agency, they are still a parent and should be so identified.

Quality Service Delivery Systems (QSDS):

Marie Poulsen reported on committee activities (see committee minutes for details). QSDS addressed membership in their meeting and identified the following potential needs: parent with child younger than 8, an LEA representative, a service provider, and a DMH representative. QSDS also discussed and endorsed the Community Representative Recruitment Protocol.

Letha Sellers will attend the CAPTA Summit and report back to the ICC and QSDS for follow up. QSDS hopes to get information about infants and toddlers enrolled in Early Head Start and Early Start from CDE's Child Development Division and the Region IX Head Start office.

The survey questions identifying how each Department addresses social-emotional development have been refined (see QSDS meeting notes for copy of survey) and will go to partner agencies whose mission includes providing services to infants and families. Answers to these questions will help provide a profile of services available to support the social, emotional and behavioral well-being of infants, toddlers and families in California. Hallie Morrow said that she can only report on CMS services. Marie asked if it would be possible to get a list of other departmental programs, just so they will know what programs exist. Cheryl Treadwell will send Marie a report that CDSS did to identify available data elements.

Family Resources and Supports (FRSC):

Debbie Sarmiento reported on committee activities (see committee minutes for details). The FRSC reviewed documents from the Executive Committee meeting and suggested adding a column to the Public Input Tracking document to indicate whether information was provided in person or in a letter. FRSC also suggested

that it would be good to have a zip code on that tracking form. FRSC requested the descriptive information about FRSC on the placemat be changed to say "Assures awareness of family needs and supports." Stephanie will make sure that that change is transmitted to Angela so the document can be finalized. FRSC has completed four recommendations and is developing a paper on respite issues, which may have two parts - one for professionals and one for parents.

AGENCY REPORTS:

Department of Managed Health Care (DMHC) - Dan McCord reported the following:

Language Assistance Regulations will be effective on January 1, 2009. There have been various stakeholders meeting to discuss the regulations to ensure stakeholder concerns are considered as well as possible in the roll-out of these new regulations. One of the largest full service plans has begun the filing process to demonstrate how the plans propose to be in compliance with the statutory requirements. Others are expected to be filed shortly for approval.

DMHC completed its second public comment period regarding Timely Access Regulations on September 21, 2007. There was a large turnout at the public meeting in September and a large amount of comments were received by various consumers, plans, and stakeholder groups. These comments have been carefully documented, reviewed and have been or will be shortly responded to as part of the regulation process. The Timely Access regulations are enhancements to the existing access regulations and put additional requirements on the plans to ensure timely access to health care services by all plans types licensed by the DMHC. A final 15 day comment period will be scheduled shortly and will be posted on the DMHC website. The Department anticipates submitting the final regulation package to the Office of Administrative Law (OAL) in early 2008. The new regulations would become effective 30 days after OAL approval.

The DMHC has been cracking down on unlicensed "Discount Health Plans" receiving complaints from consumers who were misled into thinking that they were purchasing regular health insurance. The DMHC has been working in partnership over the last several years with state and private companies to address problems caused by fraudulent discount health cards. By requiring that discount health cards meet licensing requirements, the DMHC will provide strong consumer protections. Providers will also benefit as consumers learn that they can rely on licensed discount health cards to deliver what they advertise. Late last year the DMHC approved its first dental discount plan and several others are in the licensing process now. In addition, specific Discount Plan regulations are in development to further assist in the regulatory enforcement of these types of plans.

Since 2005 the DMHC has been investigating California health plans that offer individual health policies for engaging in the illegal practice of "post-claims"

underwriting or rescinding health policies without proving that the applicant willfully misrepresented themselves on the health application. The Survey Division is in the process of completing the last of 5 non-routines done of largest health plans the based complaints coming into the Help Center. Once the surveys are completed they will be posted in the DMHC website.

In a first ever joint announcement the DMHC and DOI announced on October 23, 2007 that they would issue joint Post Claims Underwriting Regulations to protect consumers purchasing health coverage in the individual market, and pledged to work together to end the practice if illegal recessions. DMHC has released preliminary draft regulations to establish minimum underwriting standards and to address inappropriate recessions of health insurance policies for informal stakeholder comment. The DMHC regulations will clarify existing law which states that a consumer must willfully misrepresent his/her health history before a healthy insurance policy can be rescinded. Once the proposed regulations are formally submitted to the Office of Administrative Law (OAL), the DMHC will hold a formal public hearing to receive public input on the regulations and make any changes necessary.

In 2004 the DMHC approved the merger of Wellpoint Health Network (the parent of Blue Cross of CA) with Anthem Holding Corporation. Anthem was the ultimate parent company of a number of Blue Cross and Blue Shield companies that operate outside California. As part of the merger, Blue Cross to agreed to "Undertakings" to maintain appropriate assurances regarding its continuing fiscal soundness and promising to improve operations in CA. Presently the Department is conducting a comprehensive undertaking compliance audit to evaluate and determine if BCC has met its obligations under the undertakings. On November 15, 2007 the Department assessed Health Net a fine of \$1 million for failing to disclose information on two separate occasions about a bonus program paid employees considering cancellation of health policies.

The Department is monitoring the Policy Recommendations on Autism in the report issued by the Blue Ribbon Commission on Oct. 16, 2007. As is referenced in the report on page 30, the Survey Division conducted a focus review of the 7 largest KKA health plans and their behavioral health carve-outs on the implementation of Parity legislation. One area cited was the lack of clarity regarding the distribution of responsibilities among health plans, regional centers, and schools systems for the diagnosis and treatment of children with autism-related disorders. This report provides an excellent framework to be followed to address the issues by various agencies.

The Survey Division is in the final stages of putting together our second quarterly Mental Health Workgroup meeting. The first one was held in August 07. This workgroup is the result of several of the recommendations that came out of the MH Parity Summary report which is referenced in the previously mentioned Blue Ribbon Report on Autism. The unique feature about this workgroup is that for the

first time representatives from various licensed health plans, provider groups, consumer groups, and government agencies are, and will be meeting, on a regular basis to begin to address some the MH issues, such as Continuity and Coordination of Care, Network Adequacy, ER Claims processing, and UR requirements. The beauty of this collaborative workgroup and including representatives from other agencies such as DOI, DMH, and MRMIB is that they can take information back to their agencies and work on strategies to address issues that came from the DMHC report.

Department of Developmental Services (DDS) – Kevin Brown reported the following:

The Annual Performance Report (APR), which is due to OSEP on February 1, 2008, is a major priority of DDS and the Early Start Section. A key element of the APR this year, and something which has been mentioned in previous meetings, is that the Early Start Report is being revised for universal reporting purposes. As changed, it will collect more pertinent data for California in the areas of child outcomes, assessment/evaluation and IFSP 45-day timeline, and transition from Part C to Part B. DDS has promised to share the draft ESR report with ARCA and others for feedback. Kevin added that focused monitoring is also a priority within Early Start and he believes it will result in better monitoring results and improved program performance utilizing existing resources. Regarding draft Part C regulations, he mentioned that OSEP has indicated that it could be March, April, or even later for the next round of proposed Part C regulations.

Kevin concluded DDS' report by telling the ICC that DDS is excited to be partnering with CDSS on the CAPTA Summit and regional trainings. It is a good opportunity for regional center and child welfare professionals at the local level to get together and build partnerships that will ultimately benefit young children. Kevin thanked CDSS, especially Cheryl Treadwell for the initiative shown on this project.

Patric Widmann reported that the Personnel Development Scholarship Fund has awarded \$148,774 so far this year and that a total of 128 agencies have applied for scholarships and/or training funds with over 850 personnel trained over all. (Attachment D).

California Department of Education (CDE) – Jim Bellotti reported the following:

The CDE website has been updated. Special items of interest are: WorkAbility I Committees addressing Transition Fairs, and Student Employment Competencies Curriculum; New Translations of Special Education Rights of Parent and Children under the Individuals with Disabilities Education Act (IDEA) in the following languages: Chinese, Pilipino (Tagalog), Spanish, and Vietnamese; K.C. Settlement Agreement and Legal Advisory Regarding The Rights of Students with

Disabilities in California's K-12 Public Schools; Copy of Assembly Bill 1663 to align California Special Education Law with the 2005 Code of Federal Regulations; and Identifying Positive Steps in Working with Children Who Have Serious Behavior Problems.

The State Superintendent of Public Instruction issued recommendations to the Governor and the Legislature made by his Autism Advisory Committee convened earlier this year. The Committee was charged with advising how public and nonpublic schools can better serve students with autism spectrum disorders (ASD) and their families. The Committee made the following recommendations in three areas regarding policy, sharing information, and providing assistance to schools: (1) changes are called for to ensure a seamless delivery of services and early intervention for students with ASD and their families, changes in the dissemination, training, credentials and certification of people working with students with ASD; (2) develop a statewide, education-focused interagency clearinghouse to provide information on ASD-related, evidence-based interventions, strategies, and other resources; and (3) provide technical assistance and training to people at schools to implement and disseminate evidence-based ASD information and strategies.

Assembly Bill 685 (Karnette) and Assembly Bill 1663 (Evans) were approved by the Legislature and the Governor to align California Special Education Law with the new IDEA regulations. AB 685 is technical in nature with AB 1663 having policy changes. The legislature is in recess and will return after the first of the year.

The Governor's 2008-09 Budget Proposal is due to be released January 10, 2008. All state agencies have been asked to reduce their current year budget by 10 percent to address the proposed \$8-10 billion shortfall in receipts for the budget year.

Joan Hirose (CDE) continues to work with many different entities to involve local education agencies (LEA) at the local planning level to promote prevention and early intervention programs. These programs are a priority and can be funded through the Mental Health Services Act.

Pamela Quiroz and Meredith Cathcart are meeting with the Department of Developmental Services (DDS) to assist in the revision of the Part C monitoring process of early education programs. CDE staff is also meeting with DDS staff to discuss the 2007-08 Early Start Institutes.

Department of Health Care Services - Dr. Hallie Morrow reported the following:

CCS

- Handout of Numbered Letters provided (Attachment E)
- Neonatal Quality Improvement Initiative (NQI)

- During first year of the project, 13 CCS Regional NICUs in children's hospitals reduced catheter-related bloodstream infections by 28% from baseline, resulting in a savings of \$2.83 million
- Beginning Year 2 of the project – 7 additional CCS Regional NICUs are joining. Kick-off meetings for Year 2 will be in January.
- Webpage: www.dhs.ca.gov/pcfh/cms/nqi
- Pediatric Palliative Care
 - Developing a Medi-Cal waiver to provide a pediatric palliative care benefit as a pilot project
 - CMS Staff expect to submit the waiver to the Centers for Medicare and Medicaid Services by January 2008.
 - 13 county CCS programs have expressed interest in participating in this pilot project
 - 65 home health agencies and hospice providers have expressed interest in participating
 - Webpage: www.dhs.ca.gov/pcfh/cms/ppc

High Risk Infant Follow-up (HRIF) restructured program

- Between July 1, 2006 and November 1, 2007, 5600 infants have been enrolled.
- Webpage: www.dhs.ca.gov/cms/hrif

NHSP

- Program expansion to 95 new hospitals - general acute care hospitals with licensed perinatal services
 - Plan to have some hospitals ready for certification on January 1
 - Hope to have all the new hospitals certified by early 2009
- Preliminary 2006 NHSP data
 - Screened almost 430,000 infants
 - 2.1% did not pass the inpatient screening
 - Less than 0.5% waived and less than 0.5% were missed in the hospital
 - Identified 899 infants with hearing loss (2.1 per 1000)
 - Incidence in Well-baby nursery population – 1.4 per 1000
 - Incidence in NICU population – 7.7 per 1000
 - 67% of infants identified with hearing loss by 3 months of age
 - 573 infants (64%) are known by NHSP to be enrolled in Early Start
 - 74% of these enrolled in Early Start by 6 months of age
 - Lost to Follow-up – Less than 5% of the infants tracked by HCCs (National lost to follow-up rate is 60%).
- National Initiative for Children's Healthcare Quality (NICHQ) Collaborative
 - Focus for Year 2 is on language acquisition.
 - Goal is for deaf and hard of hearing children to have age-appropriate language.
 - LAUSD is standardizing the initial and ongoing language assessments that all teachers of the deaf are doing using the Rosetti tool
 - We will be collecting data stratified by age and severity of hearing loss

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- Audiologists and hearing aid dispensers continue to drop out of the CCS program – mainly due to reimbursement problems
- Trailer bill language requires the Department to develop a contract for the procurement of hearing aids. Medi-Cal convened a stakeholder meeting at which issues and concerns were raised. This might lead to additional provider loss. Webpage: www.dhs.ca.gov/nhsp

Legislation

- SB 137 (Torlakson) – Increase CCS financial eligibility to the same federal poverty level as Healthy Families – Vetoed
- AB 1642 (Hancock) – Allow CCS to authorize services for Medi-Cal children at CCS-approved Kaiser facilities that do not have Medi-Cal contracts – Enrolled. CCS issued implementation policy in Numbered Letter 13-1007
- AB 368 (Carter) – 2-year bill that would require insurance coverage for hearing aids up to \$1000 be offered for children under 18 years of age
- ABX1 1 (Nunez) – Health Care Reform – awaiting vote on Assembly Floor

Budget

- All programs have been asked to identify 10% decrease in expenditures for the 2008-09 budget.

Department of Social Services – Cheryl Treadwell reported the following:

CDSS is in the final stages of preparation of the State's Self-Assessment Report which establishes the baseline for this phase of the federal Children and Family Services Review. The assessment report is due to the federal government by December 1, 2007. The next phase will be the onsite case review which is scheduled to begin in February 2008. The sites selected for the case review are Los Angeles, Fresno and Santa Clara counties.

CDSS and DDS, along with the assistance of WestEd and the UC Davis Resource Center for Family Focused Practice, are finalizing the first phase of our cross-systems training project: The CAPTA Summit for Strengthening Partnerships is scheduled for January 23, 2008 9:00-4:00 p.m. at the Crowne Plaza Hotel in Foster City. See Attachment F for copy of letter announcing Summit. Attendees for this phase include high-level representatives from County Welfare Director's, Regional Centers, and other partners (SELPAs, FRCs, etc.).

The CAPTA Summit is designed to inform Agency and Program Directors about the CDSS/DDS Partnership, and make clear the reasons for it: 1) it's the law, and, 2) it's best for the children. A goal of the Summit will be to enlist the support of these key players as active participants in the creation of systems that work for children 0 to 3. The CAPTA Summit will:

- Provide participants with an understanding of the CWS & EI systems in California.

- Remind people of the CAPTA/Part C referral provisions. Demonstrate, statistically and anecdotally, the need for children 0 to 3 to be referred to EI services and the benefits of those services.
- Acknowledge some of the barriers to "systems referring to systems."
- Familiarize participants with tools and strategies that are working (here or elsewhere) to ensure successful referrals.
- Provide information about dates, locations and goals for the Partnership Building Sessions
- Get feedback about examples of where this may already be working as possible "best practice" models to showcase at Partnership Building Sessions
- Gather information about what people see as biggest challenges - their fears - and agree to address at PBS.
- Enlist their help in getting the right people from their County/area (see below), because: 1) it's the law, and, 2) it's best for the kids.

Department of Alcohol & Drug Programs – Suzie O'Neill reported the following:

The Department of Alcohol and Drug Programs (ADP) budget for Fiscal Year (FY) 2006-07 is \$667.5 million. Of this amount, \$613.4 million is for local governments and communities to provide treatment, recovery, and prevention services; and \$54.1 million is for State Support. The FY 2006-07 budget of \$667.5 million represents an increase of \$52.3 million over the FY 2005-06 budget of \$615.2 million. The \$52.3 million budget increase consists of \$25.0 million for the new Substance Abuse Offender Treatment Program, \$10.0 million for a Methamphetamine Prevention Campaign, \$14.6 million due to Drug Medi-Cal and Conlan caseload increases, \$7.0 million in Drug Court Programs, and a \$4.3 million reduction due to federal grant reductions offset by increases in State Support positions and miscellaneous budget adjustments.

ADP's Director Rene Zito has designated Fetal Alcohol Spectrum Disorder (FASD) as an area to be addressed and has dedicated staff to the subject area. Dave Martin, Legislative Aide to Senator Gloria Romero attended the November 7, 2007 FASD Task Force meeting at the State Capitol. The Task Force and Mr. Martin discussed ways to inform the public of FASD issues. A letter has been drafted for review and signature for the ADP and Department of Public Health's Directors, to address manufacturers to place a warning label in all at-home pregnancy kits. Tom Montesonti, Mendocino County, reported their success in placing FASD movie trailers in theaters and posters in buses in his county. A discussion on medical malpractice breaks for OB-GYN doctors who screen for substance use was addressed. The idea came from one of the participants of the Chasnoff data discussion.

On October 4th, U.S. Senator Tim Johnson (D-SD) introduced Senate Bill 2141 entitled The Advancing FASD Research, Prevention, and Services Act. This authorization legislation calls for improved services, prevention efforts, and

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research for FASD. The co-sponsors include Senators Lisa Murkowski, Patty Murray, Richard Durbin, Mary Landrieu, and Sherrod Brown. (See attached news release.) To track this bill, go to <http://thomas.loc.gov/cgi-bin/thomas>

Article

An article from The Bakersfield Californian dated November 13, 2007, titled, "County telling pregnant women to put down that glass of wine" (Attachment G).

OTHER BUSINESS:

None

ADJOURNMENT:

The meeting was adjourned at 1:30 p.m.